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## REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Submission required under 37 CFR 1.114 Previously submitted

Application Number	09/733,230
Filing Date	December 8, 2000
First Named Inventor	Yoshifumi Tanimoto
Art Unit	2625
Examiner Name	Lett, Thomas J.
Attorney Docket Number	81800.0143

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on						
(Any unentered amendment(s) referred to above will be entered).						
iii.  Other	= ************************************					
b. Enclosed						
i. Amendment/Rep	also					
			formation Disclosure S	Statement (IDS)		
ii. Affidavit(s)/Dec	naration(s)	iv. 📙 O	ther			
2. Miscellaneous						
a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a						
period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)						
b. Other						
				1		
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.						
a.  The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit						
Account No. <u>50-1314</u>						
i. 🕍 RCE fee required	23 1.02 100 required under 57 CTK 1.17(C) = 3/30					
ii. 🔛 Extension of tim	e fee (37 CFR 1.136 and 1.17)					
	•			l		
	b. Check in the amount of \$enclosed					
c. Payment by credit ca	c. Payment by credit card (Form PTO-2038 enclosed)					
WARNING: Inform	nation on this form may become	e public. C	redit card informatio	on should not be included on		
this form. Provide of	redit card information and au	ıthorization	on PTO-2038.			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
Name (Print Type)	Troy M. Sehmelzer		No. (Attorney Agent)	36,667		
Signature		Date October 11, 2006				
	17					
CERPIFICATE OF MAILING OR TRANSMISSION						
I hereby certify that this correspondence is being transmitted via electronic filing on the date indicated						
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Signature	Luxota XHIM	Date	October 11, 2006			
Burden Hour Statement: This form is estimated to complete	ared to take 0.2 hours to complete. Tim	e will vary depe	nding upon the needs of the	individual case. Any comments on the		

omplete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.